PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

1081257

1		CLAIMS AS FILED - PART I						SMALL	ENTITY		OTUE	
	707.1.0.1.1		(Colui	(Column 1)		(Column 2)		TYPE		OF		ER THAN L ENTITY
	TOTAL CLAIN		10				RATE	FEE	7	RATE	FEE	
	FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	OF	BASIC FE	E 770.00
TOTAL CHARGEABLE CLAIMS			///	// minus 20= •]	X\$ 9=		OF	XS18=	
Ŀ	NDEPENDENT		/ minus 3 =				X43=		7	Vac		
Ľ	MULTIPLE DEPENDENT CLAIM PRESENT								+	OR		
• If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	+145=	 	OR		
	CLAIMS AS AMENDED - PART II						٠	TOTAL	Ŀ	JOR		7-20
نے	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	THAN ENTITY
AMENDMENTA	3/29/01	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	. 10	Minus			=		X\$ 9=		OR	X\$18=	
AME	Independent	ENTATION OF N	Minus	***		3		X43=		OR	X86=	
<u> </u>	TINOT PRES	ENTATION OF A	NUCTIPLE DE	PENDENT	CLAIM			+145=			+290=	
	,									OR	TOTAL	17/10
		(Column 1)		(Colum	n 2)	(Column 3)	. AC	ODIT. FEE		OR ,	ADDIT, FEE	440
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	40		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		= .		X43= ·		1	X86=	
_	PIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT C	LAIM		H			OR		
							Ľ	145=		OR	+290=	
		(Calumn 4)					ADI	DIT. FEE L	<u> </u>	OR A	DOIT. FEE	
	`\	(Column 1) CLAIMS		(Column HIGHES		Column 3)						
AMENDMENIC		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	SLY	PRESENT EXTRA	F		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
ב ב	Total	•	Minus	**	_ !	:	X	\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		43=		 	X86=	
	FIRST PRESE	H	-		OR	×00=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OPT TOTAL **OPT TOTAL												
	i ine rugnesi Nun	nber Previously Pa ber Previously Paid ber Previously Paid	ld For IN THIS	S SPACE in to	ec than '	******	ADD	IT. FEE 🖶		DR AD	DIT. FEE	
					is suc fil	Ancer unwock (oung is	n me appro	priate box i	n colun	าก 1, .	